

Health, Wellbeing and Troubled Families

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Summary

1. Governance of PF through HWB
2. Rationale
3. What has changed?
4. Risks
5. Conclusion

1. Governance

- Nottingham Shadow Health & Well Being Board
- Priority Families Programme
 - Total Place, FIP
 - Investing in staff group
 - Key worker / TAF / priority actions
 - Culture change
 - Leadership by Nottingham City Council, Police, community health provider
- HWB Strategy and Prioritisation
- HWB Decision making powers

2. Rationale

- CYPPB responsibilities(?)
- Bridging the funding gap
- Interrelationship between complex needs
- Fourth optional criterion mental health
- Agreement on significant (culture) change
- PF driver for other commissioning intentions
- PF – developmental vehicle for the shadow HWB

3. What has changed?

- Better engagement and support
- Agreement about key issues
- Framework for political governance
- Formal delegation of programme elements - greater freedom and flexibility
- PF is influencing other commissioning intentions through HWB
- High profile/high risk

4. Risks

- Largely untested leadership environment
- Joint understanding of the LA/clinical
- Speed of programme set-up
- High aspirations of the Nottingham programme
- No guarantee of success

5. Conclusion

- HWB governance – tricky to manage, but presents greater opportunities
- True tests to come – PBR, deploying resources differently
- Mutually beneficial development of PF and HWB
- PF – test of HWB decision making powers
- PF – use of HWB full executive powers?